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PTO/SB/17 (01-03)

Approved for use through 04/30/2003 OMB 0651-0032

FEE TRANSMITTAL for FY 2003 <i>Patent fees are subject to annual revision.</i>		Complete if Known	
<input type="checkbox"/> Applicant claims small entity status See 37 CFR 1.27		Application Number	09/808,156-Conf. #3048
TOTAL AMOUNT OF PAYMENT (\$)		Filing Date	March 15, 2001
840.00		First Named Inventor	Stephen L. James
		Examiner Name	J. Norris
		Group Art Unit	2827
		Attorney Docket No.	M4065.0372/P372
METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)	
<input type="checkbox"/> Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None		3. ADDITIONAL FEES	
Deposit Account Number: 04-1073		Large Entity Small Entity	
Deposit Account Name: Dickstein Shapiro Morin & Oshinsky LLP		Fee Code Fee (\$) Fee Code Fee (\$)	
The Commissioner is hereby authorized to: (check all that apply)		Fee Description Fee Paid	
<input type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments		1051 130 2051 65 Surcharge - late filing fee or oath	
<input type="checkbox"/> Charge any additional fee(s) during the pendency of this application		1052 50 2052 25 Surcharge - late provisional filing fee or cover sheet	
<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee		1053 130 1053 130 Non-English specification	
to the above-identified deposit account.		1812 2,520 1812 2,520 For filing a request for ex parte reexamination	
FEE CALCULATION		1804 920* 1804 920* Requesting publication of SIR prior to Examiner action	
1. BASIC FILING FEE		1805 1,840* 1805 1,840* Requesting publication of SIR after Examiner action	
Large Entity Small Entity		1251 110 2251 55 Extension for reply within first month	
Fee Code Fee (\$) Fee Code Fee (\$)		1252 410 2252 205 Extension for reply within second month	
Fee Description Fee Paid		1253 930 2253 465 Extension for reply within third month 520.00	
1001 750 2001 375 Utility filing fee		1254 1,450 2254 725 Extension for reply within fourth month	
1002 330 2002 165 Design filing fee		1255 1,970 2255 985 Extension for reply within fifth month	
1003 520 2003 260 Plant filing fee		1401 320 2401 160 Notice of Appeal 320.00	
1004 750 2004 375 Reissue filing fee		1402 320 2402 160 Filing a brief in support of an appeal	
1005 160 2005 80 Provisional filing fee		1403 280 2403 140 Request for oral hearing	
SUBTOTAL (1) (\$)		1451 1,510 1451 1,510 Petition to institute a public use proceeding	
0.00		1452 110 2452 55 Petition to revive - unavoidable	
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE		1453 1,300 2453 650 Petition to revive - unintentional	
Total Claims ** = Extra Claims Fee from below Fee Paid		1501 1,300 2501 650 Utility issue fee (or reissue)	
Independent Claims ** =		1502 470 2502 235 Design issue fee	
Multiple Dependent		1503 630 2503 315 Plant issue fee	
Large Entity Small Entity		1460 130 1460 130 Petitions to the Commissioner	
Fee Code Fee (\$) Fee Code Fee (\$)		1807 50 1807 50 Processing fee under 37 CFR 1.17(q)	
Fee Description		1808 180 1806 180 Submission of Information Disclosure Stmt	
1202 18 2202 9 Claims in excess of 20		8021 40 8021 40 Recording each patent assignment per property (times number of properties)	
1201 84 2201 42 Independent claims in excess of 3		1809 750 2809 375 Filing a submission after final rejection (37 CFR 1.129(a))	
1203 280 2203 140 Multiple dependent claim, if not paid		1810 750 2810 375 For each additional invention to be examined (37CFR 1.129(b))	
1204 84 2204 42 ** Reissue independent claims over original patent		1801 750 2801 375 Request for Continued Examination (RCE)	
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent		1802 900 1802 900 Request for expedited examination of a design application	
SUBTOTAL (2) (\$)		Other fee (specify)	
0.00		*Reduced by Basic Filing Fee Paid	
**or number previously paid, if greater. For Reissues, see above.		SUBTOTAL (3) (\$)	
		840.00	
SUBMITTED BY		Complete (if applicable)	
Name (Print/Type) Thomas J. D'Amico		Registration No. 28,371	
Signature		Telephone (202) 828-2232	
		Date May 5, 2003	



NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES		Docket Number (optional) M4065.0372/P372	
In re Application of Stephen L. James			
Application Number 09/808,156		Filed March 15, 2001	
For SINGLE SIDED ADHESIVE TAPE FOR COMPOUND DIVERSION ON BOC SUBSTRATES			
Group Art Unit 2827		Examiner J. Norris	
<p>Applicant hereby appeals to the Board of Patent Appeals and Interferences from the last decision of the examiner.</p> <p>The fee for this Notice of Appeal is (37 CFR 1.17(b)) \$ <u>320.00</u>.</p> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half and the resulting fee is: \$ _____.</p> <p><input type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input checked="" type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. <u>04-1073</u>. I have enclosed a duplicate copy of this sheet.</p> <p><input checked="" type="checkbox"/> A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.</p> <p>I am the</p> <p><input type="checkbox"/> applicant /inventor</p> <p><input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)</p> <p><input type="checkbox"/> attorney or agent of record.</p> <p><input checked="" type="checkbox"/> attorney or agent acting under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a). <u>28,371</u></p> <p> Signature</p> <p><u>Thomas J. D'Amico</u> Typed or printed name</p> <p><u>May 5, 2003</u> Date</p> <p>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.</p> <p><input type="checkbox"/> *Total of <u>1</u> forms are submitted.</p>			

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